United States Bankruptcy Court 61288, Houston TX 77208	SOUTHERN DISTRI- (Houston Divi	CT OF TEXAS P.O.Box ision)	PROOF OF CLAIM
Name of Debtors		Case Number	
Stage Stores, Inc., a Delaware cor Specialty Retailers, Inc., a Texas o Specialty Retailers, Inc. (NV), a Ne	corporation	00-35078-H2-11 00-35079-H2-11 00-35080-H2-11	788-34292 Creditor ID#:
*place an "x" beside the name of the Debto against	r you are filing a claim		
Name of Creditor (The person or other entity to money or property): Kfox Tv	whom the debtor owes	Check box if you are aware that anyone else a filed a proof of claim relating to your claim. Attach copy of statement giving particulars.	United States Bankruptcy Court Southern District of Texas FILED JUN 2 6 2000
Name and address where notices should be ************************************		Check box if you have never received any notices from the bankruptcy court in this case	Michael N. Milby, Clerk
1st Floor El Paso TX 79912-4606		Check box if the address differs from the address on the envelope sent to you by the court.	
Account or other number by which creditor in 200790 Advertages	identifies debtor:	Check here reblaces	/iously filed claim, dated:
1. Basis for Claim Goods sold Services performed Palvertusing Money loaned Personal injury/wrongful death Taxes Other	z facilime Invo	Retiree benefits as defined in 11 to Wages, salaries, and compensation. Your SS#: Unpaid compensation for services from to to (date)	on (Fill out below) performed
2. Date debt was incurred:		3. If court judgment, date of	
4. Total Amount of Claim at Time Case File If all or part of your claim is secured or entit Check this box if claim includes interest additional charge	led to priority, also complet or other charges in addition		Attach itemized statement of all interest or
 5. Secured Claim. — Check this box if your claim is secured to right of setoff). — Brief Description of Collateral: — Real Estate — Motor Vehicle — Other All personal and intangible proposed. Value of Collateral: — Amount of arrearage and other charges at the secured claim, if any \$	perty of Debtor's Estate	the bankruptcy petition or cessation of U.S.C. § 507(a)(3) Contributions to an employee benefit purply to \$1,950* of deposits toward purply personal, family, or household use - 11 Alimony, maintenance, or support ower 507(a)(7). Taxes or penalties owed to government Other – Specify applicable paragraph of *Amounts are subject to adjustment on 4/1	unsecured priority claim 1: 2 \$4,300),* earned within 90 days before filing of the debtor's business, whichever is earlier - 11 lan - 11 U.S.C. § 507(a)(4). lase, lease, or rental of property or services for U.S.C. § 507(a)(6). d to a spouse, former spouse, or child - 11 U.S.C. Ital units - 11 U.S.C. § 507(a)(8). of 11 U.S.C. § 507(a). /98 and every 3 years thereafter with respect to
7. Credits: The amount of all payments on this o	•	cases commenced on or after the date of a	
the purpose of making this proof of claim.	_		
the purpose of making this proof of claim. 8. Supporting Documents: Attach copies notes, purchase orders, invoices, itemized statem court judgments, mortgages, security agreements DO NOT SEND ORIGINAL DOCUMENTS. If the explain. If the documents are voluminous, attach enclose a stamped Copy: To receive an ackreenclose a stamped, self-addressed envelope and	nents of running accounts, cont s, and evidence of perfection of documents are not available, a summary. nowledgment of the filing of you	racts, f lien.	

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77057

100612
STAGE STORES INC.
C/O REYNOLDS MEDIA SERVICES
2425 FOUNTAINVIEW, SUITE 355
HOUSTON TX

KFOX-TV

STATEMENT DATE:

6/30/00

PAGE:

1

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					PLEASE RAY : THIS AMOUNTS

EL PASO+LAS CRUCES CABLE CHANNEL 8 6004 N. MESA STREET **1ST FLOOR**

INVOICE AND AFFIDAVIT

(915) 833-8585 EL PASO, TX 79912 Fax (915) 833-89

100612 STAGE 9 C/O RE 2425 HOUSTON GE STORES
REYNOLDS FOUNTAINVIEW, ON TX 77057 INC. MEDIA SUITE SERVICES 355

REP...:

SLSP.: ADV..: LIZA WI BEALLS WHITTEN

INVOICE NO. 00610039

PAGE 1

BROADCAST MONTH

JUNE

CONTRACT YEAR

ORDER

TYPE

STANDARD

KFOX-TV

DATE

σ

/09/00

790-00035

PROD: BEALLS

ONE DAY SALE

REF#: DESC:

STANDARD SCHEDULE DATES 6/07/00- 6/08/00 BROADCAST CALENDAR

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				0	¥ E	6:55	:15	-15T/:1	5.0		
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WE WARRANT THAT	THE ACTUAL					- ,			TOTAL RECONCILING	NG	
BROADCAST INFORMATION SHOWN C	ATION SHOWN ON	•			-		AGENCY COMMISSI	ION 133.50	ITEMS		.00
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ENTERPRISE FORM NO. KFOXIC94.v2	(IC94.v2		REP	P COPY							

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INVOICE AND AFFIDAVIT

EL PASO, TX 6004 N. MESA STREET **1ST FLOOR** 79912 Fax (915) 833-89 $\frac{73}{3}$

100612 STAGE : C/O] 2425 HOUSTON BE STORES FOUNTAINVIEW, ON TX 77057 ΉX INC. MEDIA SERVICES
SUITE 355

REP...:

SLSP.: LIZA WHITTEN

INVOICE NO. 00510137

PAGE 1

BROADCAST MONTH
MAY

CONTRACT YEAR

SCHEDULE DATES 5/03/00- 5/17/00

STANDARD

BROADCAST

BILLING INSTRUCTIONS OADCAST CALENDAR

ORDER

TYPE STANDARD

KFOX-TV

DATE

5/23/00

790-00034

REF#: DESC: ONE DAY SALE

> ADV..: PROD: BEALLS BEALLS

ENTERPRISE FORM NO. KFOXIC94,v2	PROGRAM LOG.	THIS INVOICE WAS TAKEN FROM	WE WARRANT THAT THE ACTUAL BROADCAST INFORMATION SHOWN		PER CONFIRMATION	PERIOD COST			8P-9P		11P-1130P		1030P-11P		10P-1030P			NEWS**	9P-10P **		630P-7P		6P-630P	DESCRIPTION	
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